

DATE _____

APPLICANT _____

NO. _____

CITY OF LEBANON, OHIO
APPLICATION FOR PLUMBING PERMIT

OWNER: _____

Name _____ Address _____

Location of property where permit is required _____
CONTRACTOR: _____

Name _____ Address _____ Phone No. _____

* * * * *

NATURE OF INSTALLATION: New Bldg. _____ Addition _____ Remodeling _____

Gas Piping _____ Water Piping _____ Septic Tank _____ Drainage System _____

DESCRIPTION OF WORK:

Bath Tubs _____ Sump Pump _____ Hose Bibbs _____

Showers _____ Water Softeners _____ Grease Trap _____

Laundry Trays _____ Dishwashing Machine _____ Downspouts within bldg. _____

Lavatories _____ Urinal _____ Drinking Fountains _____

Water Closets _____ Floor Drains _____ Kitchen Sinks _____

Slop Sinks _____ Water Heater _____

* * * * * CORRECTIONS: _____

Permit Fee _____ APPROVALS _____ DATE _____ INSPECTOR _____

Notes _____
